



**KILPATRICK
STOCKTON LLP**

Attorneys at Law

**RECEIVED
CENTRAL FAX CENTER**

APR 22 2005

Suite 2800 1100 Peachtree St.
Atlanta GA 30309-4530
(404) 815 6500 f 404 815 6555
www.KilpatrickStockton.com

April 22, 2005

FAX

RECIPIENT/ PHONE NO.	FAX NO.	COMPANY/ CITY, STATE, COUNTRY
Centralized Fax Dept. GAU 2157 Examiner Saleh Najjar	703.872.9306	U.S. Patent and Trademark Office Alexandria, VA 22313-1450

Brenda O. Holmes

FROM

6559

REFERENCE NO

6

PAGES (WITH COVER)

W2100/204330

CLIENT/MATTER NO.

PLEASE CALL 404 815 6497 IF YOU HAVE DIFFICULTY WITH THIS TRANSMISSION.

CONFIDENTIALITY NOTE:

The information contained in this fax message is being transmitted to and is intended for the use of the individual named above. If the reader of this message is not the intended recipient, you are hereby advised that any dissemination, distribution or copy of this fax is strictly prohibited. If you have received this fax in error, please immediately notify us by telephone and destroy this fax message.

COMMENTS

Applicant: Mark Ryan et al.
Title: Weather Information Delivery Systems and Methods
Providing Planning Functionality and Navigational Tool
Serial No./Docket No.: 09/766,295 W2100/204330
Filed: 01/19/2001

PAPERS SUBMITTED:

1. PTO/SB/21 - Transmittal form;
2. PTO/SB/08 - Patent Application Fee Determination Record;
3. Petition for Extension of Time (1 month);
4. First Response in application to non-final Office Action of 03/21/05 electing Group 1; and
5. PTO-2038 - Credit Card Payment form.

Date: April 22, 2005

By: Brenda O. Holmes, Reg. No. 40,339

TO BE COMPLETED BY KS OPERATIONS CENTER

TRANSMISSION RECEIPT DATE/TIME: _____

COMPLETED BY: _____

JOB CODE

19880

PTO/SB/21 (09-04)

Approved for use through 07/31/2006. OMB 0851-0031

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	09/766,295
	Filing Date	01/19/2001
	First Named Inventor	Mark Ryan et al.
	Art Unit	2157
	Examiner Name	Saleh Najjar
Total Number of Pages in This Submission	Attorney Docket Number	W2100/204330

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): <div style="text-align: center; padding-top: 10px;">PTO/SB/06 - Fee Application Determining Record</div>
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	KILPATRICK STOCKTON LLP		
Signature	<i>Brenda O. Holmes</i>		
Printed name	Brenda O. Holmes		
Date	04/22/2005	Reg. No.	40,339

CERTIFICATE OF TRANSMISSION/MAILING		
I hereby certify that this correspondence is being facsimile transmitted to the USPTO's Centralized Facsimile Number (703) 872.8306 on the date shown below.		
Signature	<i>Janie Wilkins</i>	
Typed or printed name	Janie Wilkins	Date 04/22/2005

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.